



Health Reform Implementation

Life Works Washington
February 27, 2013

Jenny Hamilton, Senior Policy Analyst, HCA Health Care Policy
Mary Wood, Section Manager, HCA Eligibility and Service Delivery

Topics for Today

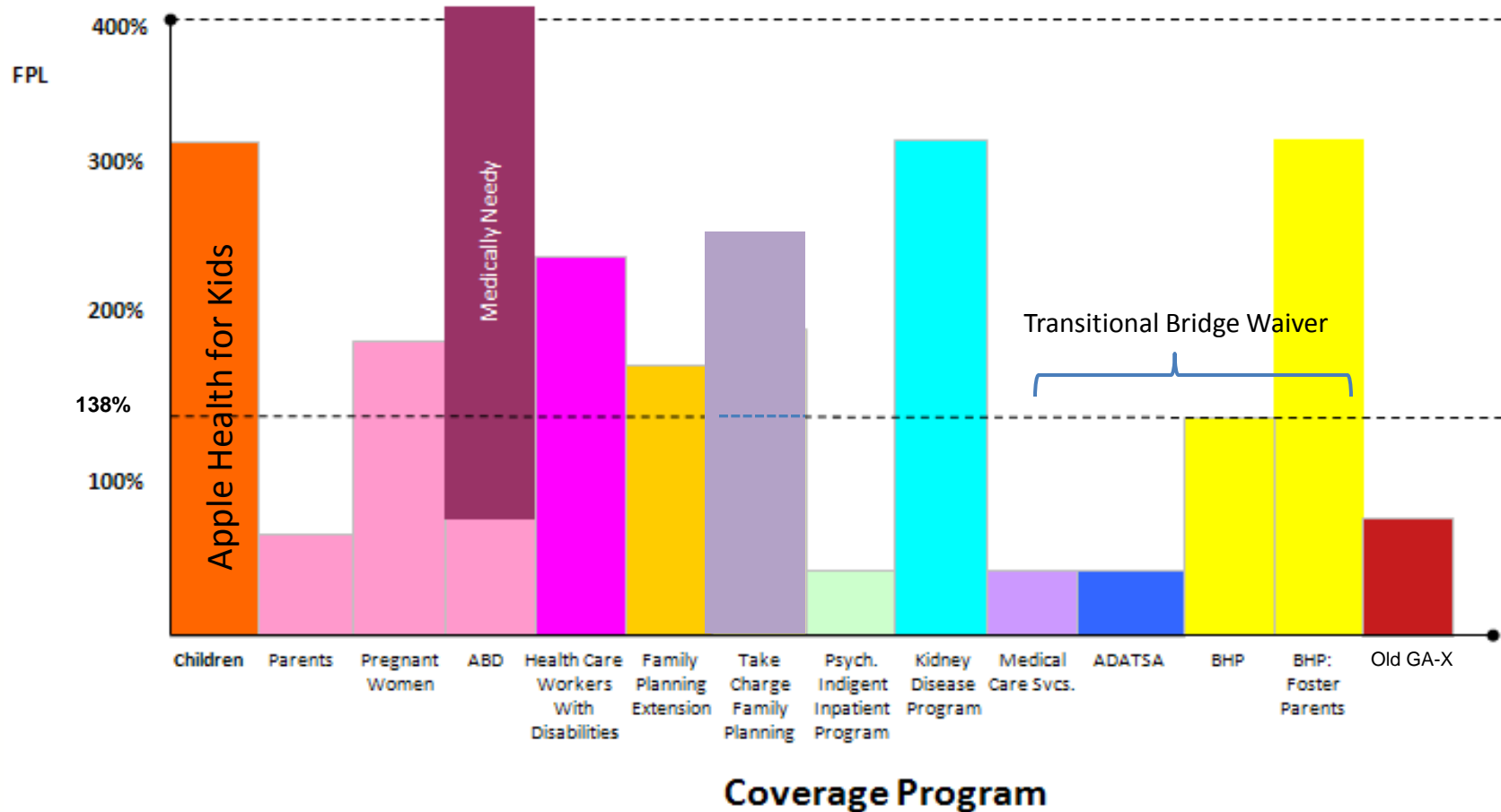
- Audience check in
- Medicaid – Pre and Post ACA
- Medicaid Expansion Estimates
- The Work Ahead
- Streamlining Enrollment
- Consumer Assistance
- Adult Benefits
- Questions

Links to More Information

- Web-sites: <http://www.hca.wa.gov/>
 - For information about the Medicaid expansion:
<http://www.hca.wa.gov/hcr/me>
 - For information about the Health Benefit Exchange:
<http://wahbexchange.org/>
 - To contact the HCA concerning the Medicaid expansion:
medicaidexpansion2014@hca.wa.gov
- Webinars and presentations around the state
 - See upcoming schedule and past events at:
<http://www.hca.wa.gov/hcr/me/stakeholdering.html>
- Listserv notification
 - Subscribe at:
<http://listserv.wa.gov/cgi-bin/wa?SUBED1=HCA-STAKEHOLDERS&A=1>

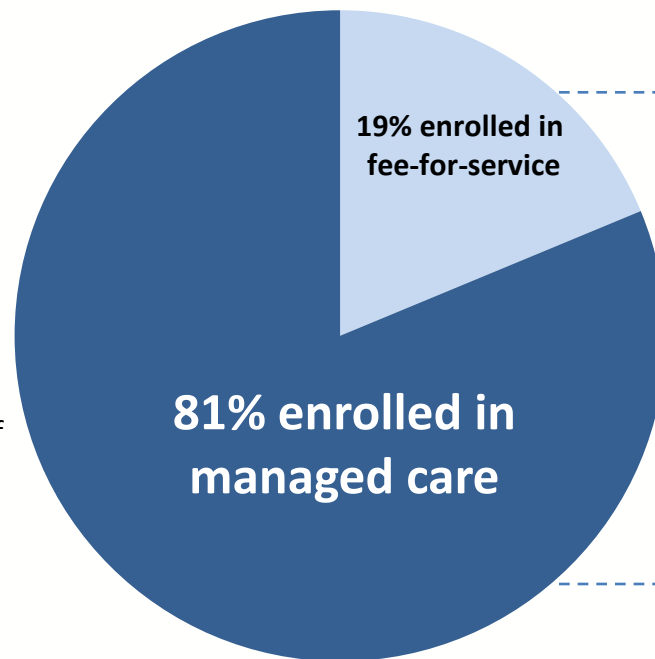
Medicaid – Pre and Post ACA

Today's Washington State Landscape



Delivery Systems for Medical Benefits

Just over 1 million beneficiaries receive their full medical coverage from Medicaid
(excludes duals, partial duals, family planning-only and alien emergency medical.)



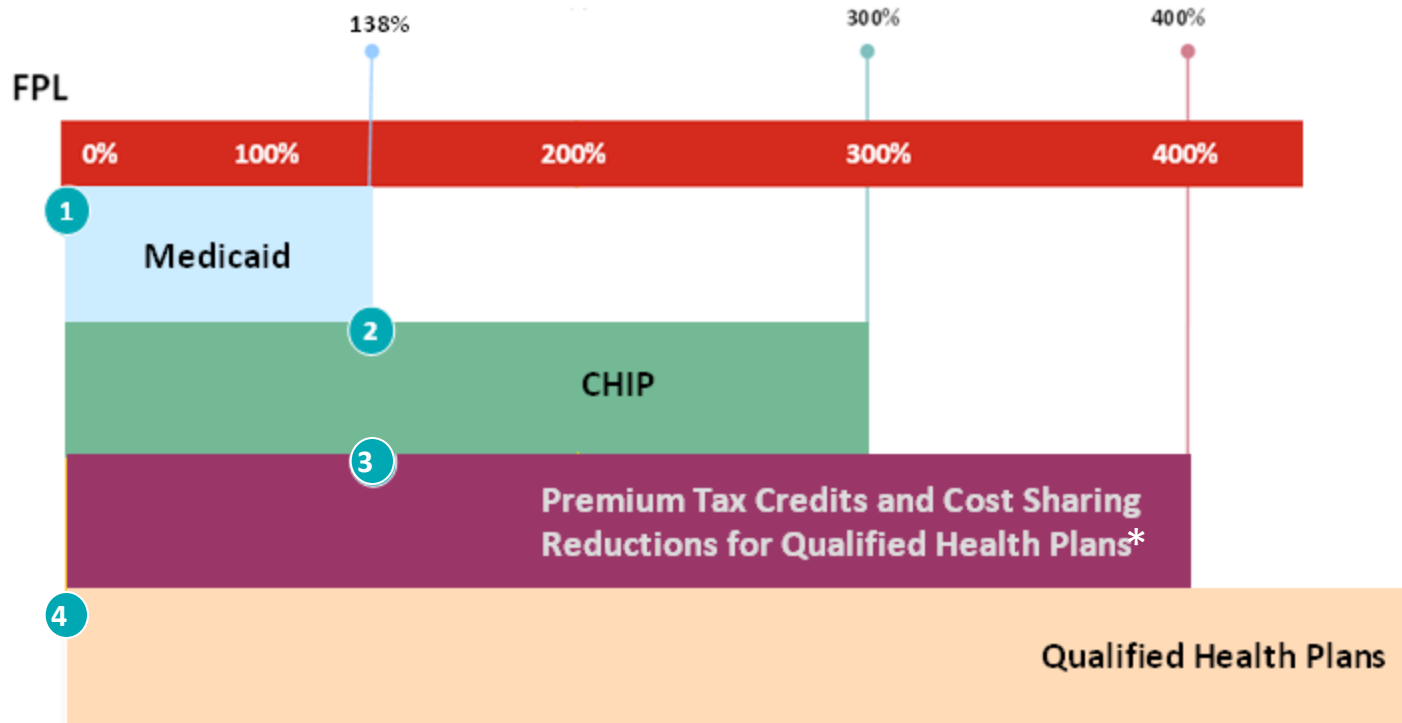
Current Health Plans

- Amerigroup
- Community Health Plan of Washington (CHPW)
- Coordinated Care
- Molina Healthcare
- UnitedHealth

	FFS	Managed Care
Adults	64,893	220,516
Children	124,582	600,944

Source: Medicaid Assistance Eligible Persons Report – Preliminary December Enrollment; Basic Health Monthly Enrollment December 2012

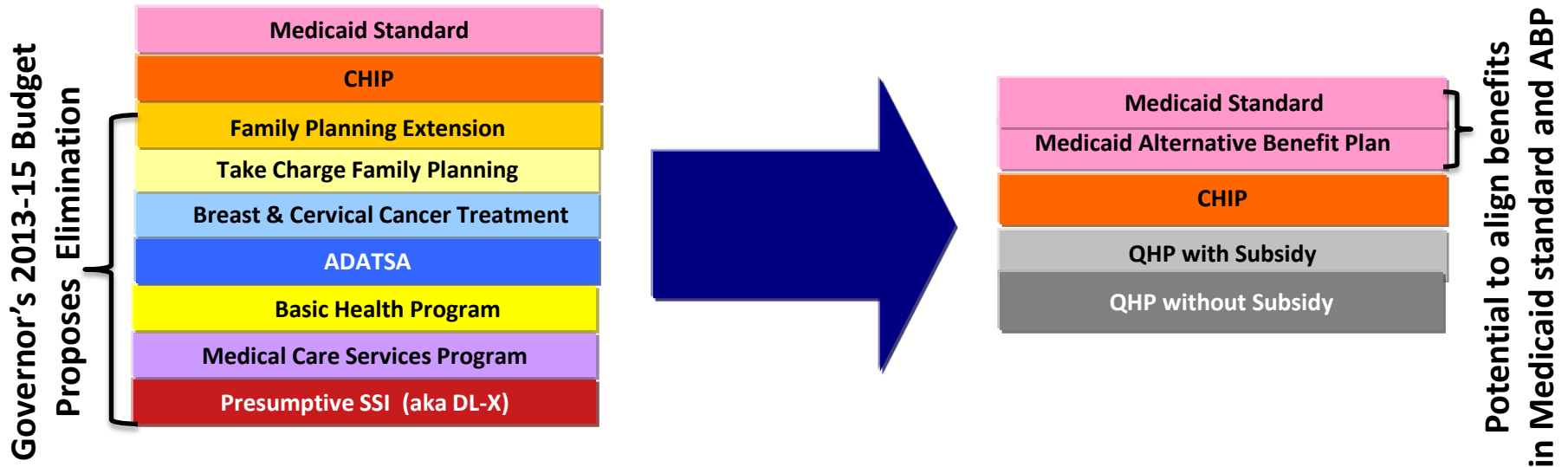
2014 ACA Continuum of “Insurance Affordability Programs”



* Federal Basic Health Plan Option for individuals with incomes between 138% and 200% of the FPL will not be available in 2014.

Opportunity to Streamline Programs

2014 Coverage Continuum through
Insurance Affordability Programs (IAP)



Streamlining considerations – numbers affected,
access/continuity of coverage through IAP continuum,
administrative complexity, transition timing

Revised: February 2013

2014 Medicaid Coverage

- Option to expand Medicaid to 138% of the FPL for adults under age 65 not receiving Medicare* - based on Modified Adjusted Gross Income (MAGI)
 - **MAGI methodology** defines how income is counted, and how household composition and family size are determined
 - **MAGI** will determine eligibility for children, pregnant women, parents and all adults in the new adult category
 - **Non-MAGI** (classic) Medicaid eligibility standards will still apply to aged, blind, disabled, SSI, & foster children – ACA doesn't impact these groups
- Washington's new adult group will include:
 - **Childless adults** with incomes below 138% of the FPL
 - **Parents** with incomes between ~40% and 138% of the FPL

* The ACA's "133% of the FPL" is effectively 138% of the FPL because of a 5% across-the-board income disregard

Federal Poverty Levels and Annual Income (2012)

Federal Poverty Level	Annual Income: Individual	Annual Income Level: Family of 3
100%	\$11,170	\$19,090
133%	\$14,856	\$25,390
138%	\$15,415	\$26,344
200%	\$22,340	\$38,180
300%	\$33,510	\$57,270
400%	\$44,680	\$76,360

Enhanced Federal Funding for New Adult Group

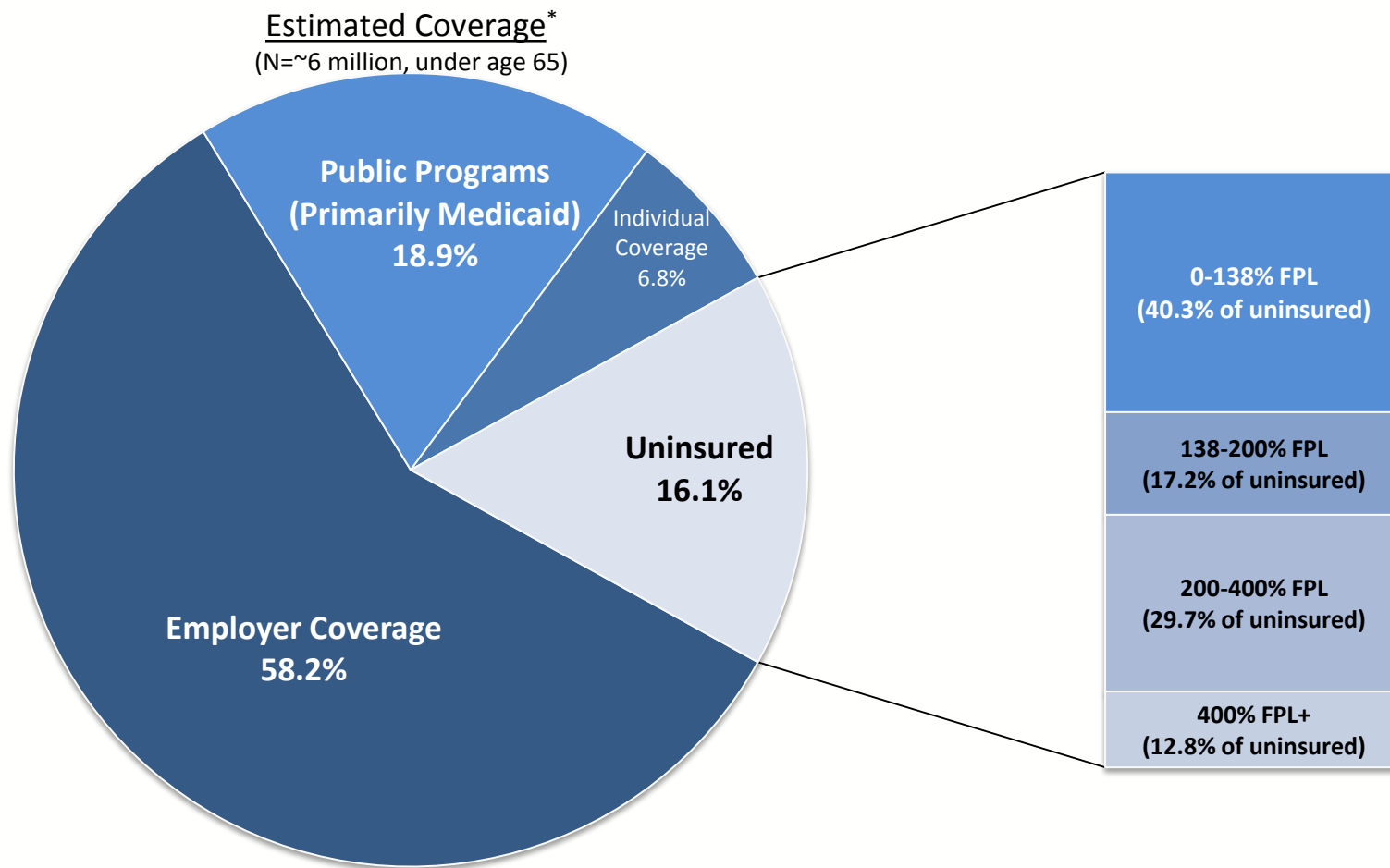
- Newly eligible parents and childless adults are:
 - under 65 years old
 - not pregnant
 - not entitled to Medicare
 - not in an existing Medicaid category (e.g. children, pregnant women, aged, blind and disabled)

- Enhanced federal funding for costs of newly eligible adults:

	2014	2015	2016	2017	2018	2019	2020 +
State Share	0%	0%	0%	5%	6%	7%	10%
Federal Share	100%	100%	100%	95%	94%	93%	90%

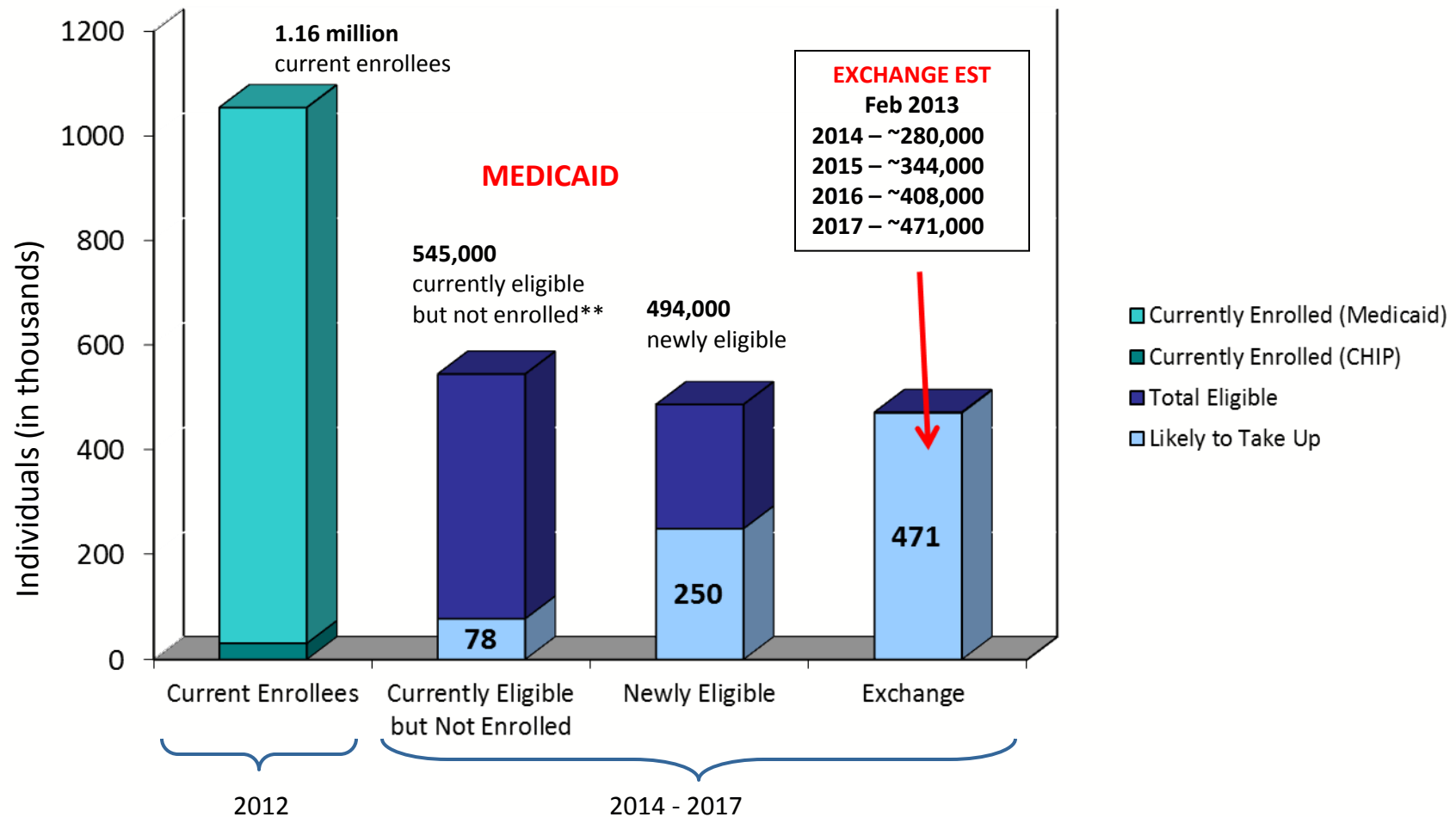
Medicaid Expansion Estimates

Pre-Implementation of the ACA: Primary Source of Insurance in Washington State, 2011



* Source: OFM Estimates from 2011 Single-Year American Community Survey PUMS - includes individuals under age 65

Post-Implementation of the ACA: Subsidized Coverage Landscape in Washington








Note: Analysis forecast assumes full take up rate and the ACA was in effect in 2011.

**Includes individuals who have access to other coverage (e.g., employer sponsored insurance). Sources: The ACA Medicaid Expansion in Washington, Health Policy Center, Urban Institute (May 2012); The ACA Basic Health Program in Washington State, Health Policy Center, Urban Institute (May 2012); Milliman Market Analysis; and Washington Health Care Authority for Medicaid/CHIP enrollment.

Uninsured Groups Remain

- Undocumented immigrants
- Individuals exempt from the mandate who choose to not be insured (e.g., because coverage not affordable)
- Individuals subject to the mandate who do not enroll (and are therefore subject to the penalty)
- Individuals who are eligible for Medicaid but do not enroll

Access to Care

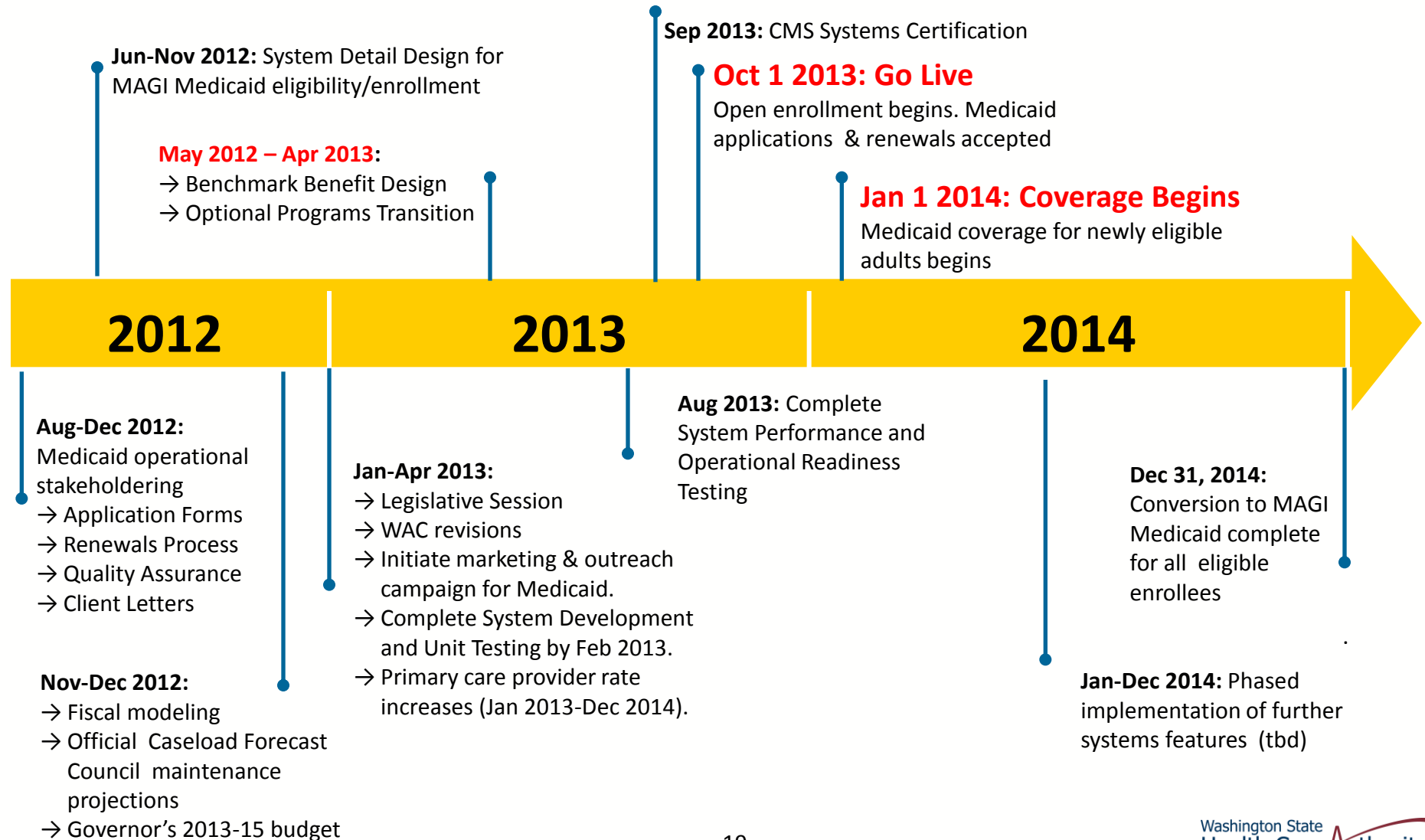
- OFM survey of primary care physicians in WA state show that:
 - ~ 90% of PCPs provide care for some patients covered by Medicaid
 - ~ 80% of PCPs accepting new patients
-  ~30% of this group not including new Medicaid clients
 -  Just over 20% reported all their new patients could be Medicaid
- Reports available include:
 - Characteristics and distribution of current primary care physicians
 - http://www.ofm.wa.gov/healthcare/deliverysystem/2011_PCP_survey_frequency_report.pdf
 - Availability of Primary Care Physicians to Serve the Medicaid Expansion
 - <http://www.ofm.wa.gov/researchbriefs/2012/brief065.pdf>
 - Washington State Primary Care Nurse Practitioner Survey
 - http://www.ofm.wa.gov/healthcare/deliverysystem/2012_NP_survey_frequency_report.pdf
-  Primary care physician rate increases (2013 - 2014) <http://www.hca.wa.gov/acarates>
 -  OIC health plan network assessment includes essential community providers
 -  HPSA (health care professional shortage areas) concerns remain

Washington's Continuing Challenge

- Medicaid delivery system silos
 - Managed care, fee-for-service
 - County-based behavioral health
 - Dual-eligibles
 - Long-term services and supports
- Fragmented service delivery and lack of overall accountability
- Service needs and risk factors overlap in high-risk populations
- Incentives and reimbursement structures not aligned to achieve outcomes
- Existing design not sustainable

The Work Ahead

Timeline: Much Work to be Done!



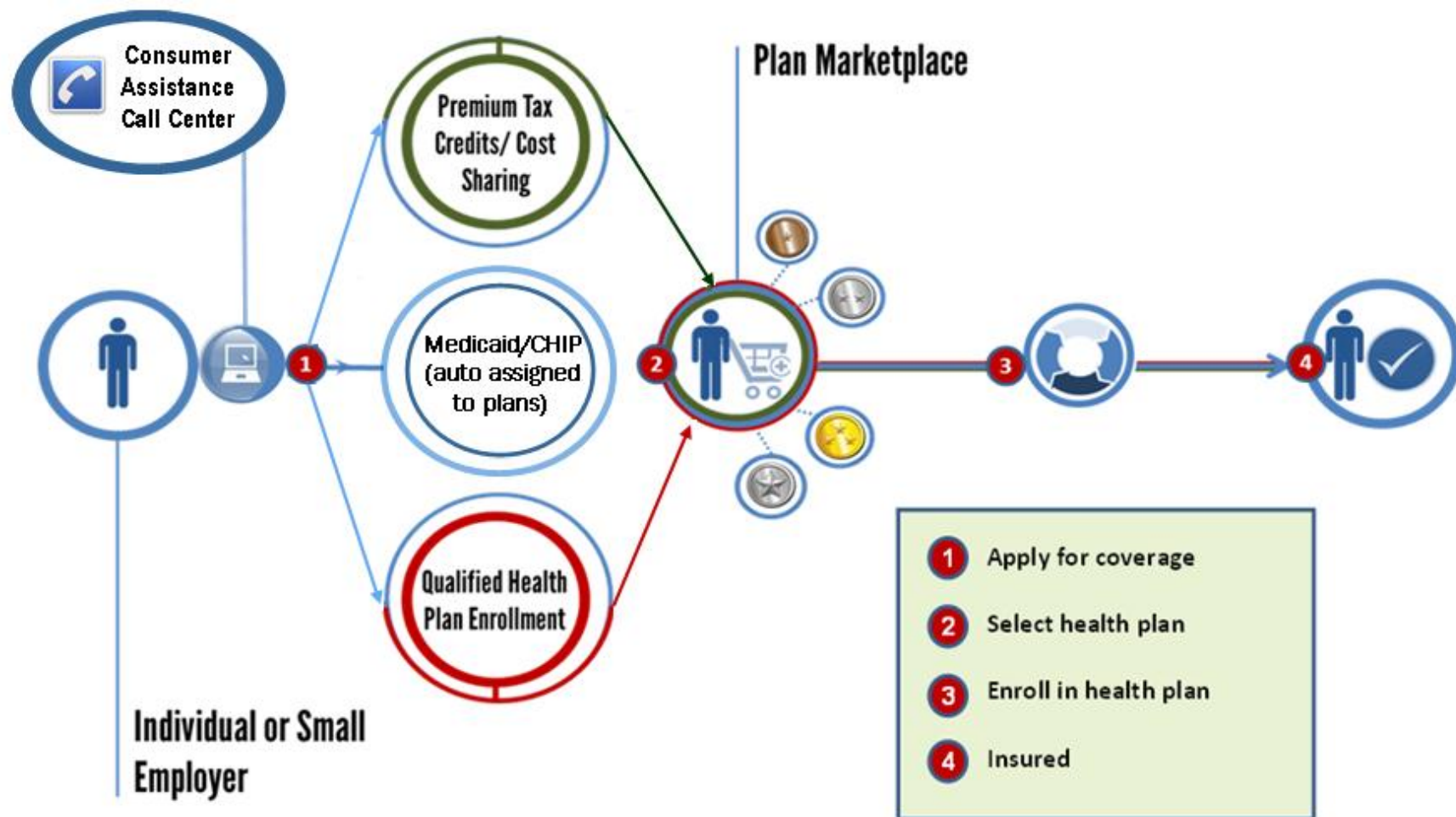
Health Care Reform Goals

- Optimize opportunities to streamline administrative processes
- Leverage new federal financing opportunities to ensure the Medicaid expansion is sustainable
- Maximize use of technology to create consumer-friendly application/enrollment/renewal experience
- Maximize continuity of coverage & care as individuals move between subsidized coverage options
- Reform the Washington Way --- comply with, or seek waiver from, specific ACA requirements related to coverage and eligibility, as needs are identified


Streamlining Enrollment

The Exchange: One-Stop Shopping for Coverage

Think: Amazon.com or Expedia... a simple way to shop for health insurance



Washington Healthplanfinder



SEE HOW THE MENDEZ FAMILY SIGNED UP FOR HEALTH INSURANCE...

Find the Right Health Insurance for You

Welcome Washington residents! The Washington Health Benefits Exchange offers quality, affordable coverage options to Washington families. Shop, compare, and enroll right here. It's your health, be there!

[Find a New Health Care Plan](#)

[Renew An Existing Plan](#)

Employer-sponsored Coverage

If your Employer has offered you coverage through this exchange, click here to learn about coverage options for you and your family.

[Enroll Through Your Employer >](#)

Enroll Through Your Employer For small business owners seeking to offer quality, affordable coverage to their Washington employees click

Click. Compare. Covered.

The Exchange is Here! ariO is uninsured. He needed to go to the doctor. A friend referred him to the Washington Exchange. He found coverage that was right for him. Now he is insured and healthy.

[Click Here to Learn Eries Story >](#)

INSURANCE PLANS AVAILABLE IN WASHINGTON

Sign In

User Name

Password

☐ Remember Me

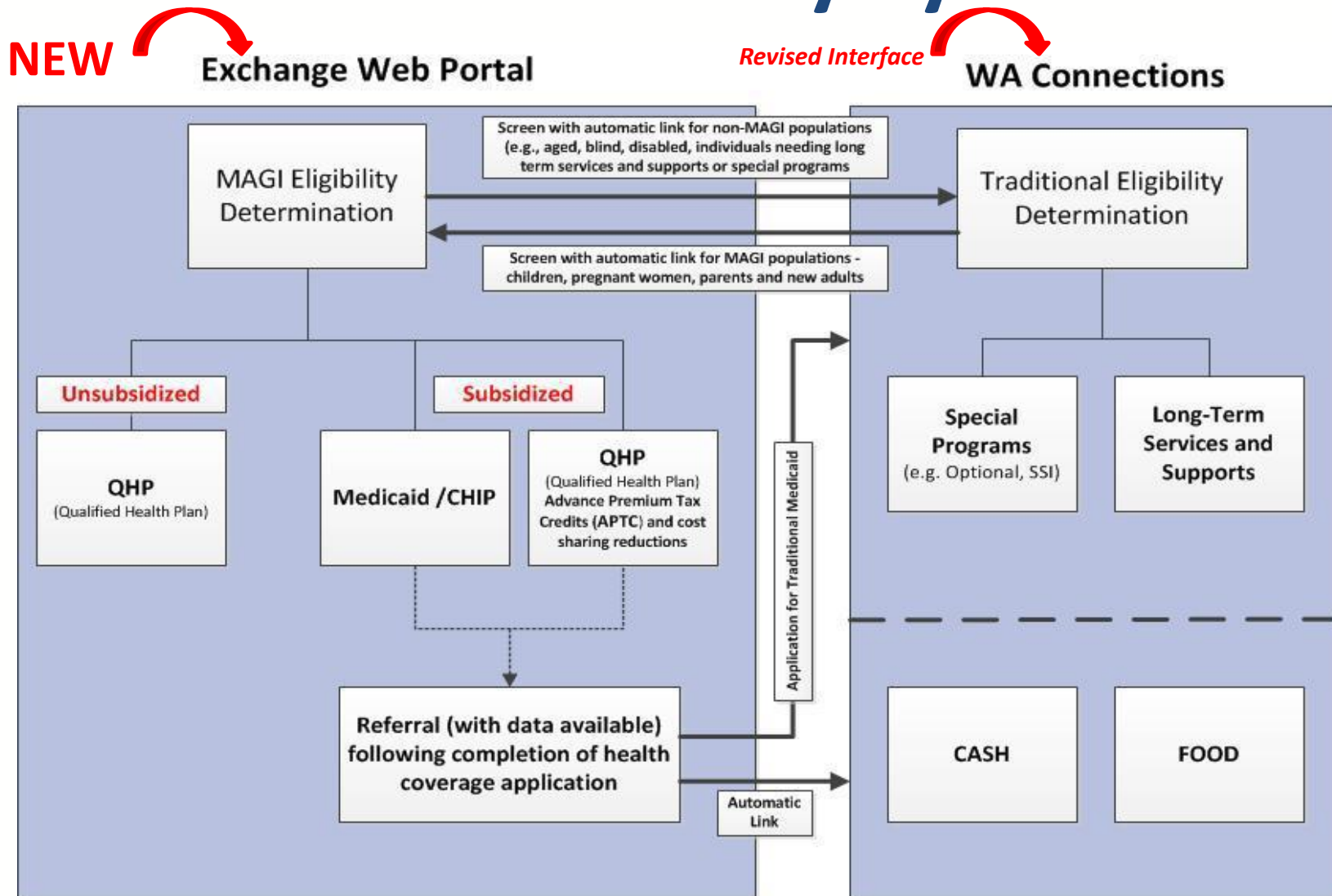
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Coordinated Entry Systems



Consumer Assistance

Consumer Assistance

To reach uninsured Washington residents, the state will rely on:



Navigators, Agents and Brokers: will provide help to consumers and small businesses with enrolling into coverage on the Exchange; provide advice to consumers about their enrollment options and premium tax credits; and make referrals of complex cases to Consumer Assistance Programs



Community-Based Organizations: Continued partnership with existing community-based network



Call Center: Toll-Free Hotline operated by the Exchange to provide insurance application assistance

Community-Based Organizations

CBOs can assist with outreach to Washington State residents such as:

- **New applications:**
 - Assist individuals in applying for health care coverage through the new health benefit exchange web portal. **Target Newly Eligible Adults** age 19-64 with income up to 138% FPL.
- **Transitions from other coverage:**
 - Support current Basic Health members as they use the new Washingtonhealthplanfinder portal (Oct-Dec 2013) to transition to coverage for January 2014
 - Follow up with Medical Care Services and ADATSA clients regarding their automatic conversion to coverage beginning January 2014
- **Renewals of Medicaid coverage:**
 - Encourage/assist current Medicaid recipients (children, parents, pregnant women) who must renew coverage using the Washingtonhealthplanfinder portal during 2014 (and beyond)

Navigator Program Timeline

January-March

- Board Approval
- Issue RFP

April-June

- Select Navigator Organizations
- Contracting

July-September

- Train-Certify Navigators
- Coordinate/train partner

October-December

- Open Enrollment
- Performance Monitoring



Adult Benefits

Benefits for Newly Eligible Medicaid Adults

- Called Alternative Benefit Plan (aka Medicaid Benchmark)
- Benefits for new adults must:
 - Cover all 10 essential health benefits (EHBs) as defined for Medicaid (may be different from Health Benefits Exchange)
 - Meet mental health parity (currently applies to private health plans and Medicaid managed care but not fee-for-service)
 - Cover non-emergency medical transportation
 - Cover Early Periodic Screening, Diagnosis and Treatment (EPSDT)
- Benefits for new adults may:
 - Align with existing Medicaid benefit package
 - Differ for different eligibility groups
- Strawman -

Essential Health Benefits

1. Ambulatory services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health and substance use disorder services, including behavioral health treatment
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services, including oral and vision care

http://www.hca.wa.gov/me/documents/alternative_benefit_plan_strawman020713.pdf

Problem - Multiple ABPs for Adults



Consumers

Potential for fewer benefits to be covered by current Medicaid standard creates equity issue and confusion over care covered when circumstances change Medicaid enrollee's income



Providers

Service delivery and payment confusing if coverage for Medicaid adults differs between Medicaid standard and the ABP



Health Plans

Tracking and communicating benefit changes to enrollees (and their providers) increased and complex; provider payments confused when adult status *within* Medicaid changes; rate development more difficult



State/Federal Governments

Systems interfaces and administration complicated when adult status *within* Medicaid changes (e.g., increased tracking and monitoring; challenging communication to beneficiaries, providers and health plans; complex payments and reconciliation)

Questions?